

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 830785	RECEIPT DATE:	05 / 01 / 01
IA NUMBER:	PCT/ JP99 / 06086	IA FILING DATE:	11 / 02 / 99
FAMILY NAME:	HAMABE	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	KOJIRO	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	11 / 02 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	P/1905-100	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 2123820700
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NAME: OSTROLENK FABER GERB & SOFFEN

STREET: 1180 AVENUE OF THE AMERICAS

CITY: NEW YORK

STATE/COUNTRY: NY ZIP: 100368403

EMAIL:

APPLICATION TITLES:

TRANSMISSION POWER CONTROL METHOD AND TRANSMISSION POWER CONTROL APPAR  
ATUS IN MOBILE COMMUNICATION SYSTEM

TAB TO LAST POSITION,PUSH SEND



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Bib Data Sheet

CONFIRMATION NO. 3695

<b>SERIAL NUMBER</b> 09/830,785	<b>FILING DATE</b> 05/01/2001 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2684	<b>ATTORNEY DOCKET NO.</b> P/1905-100
<b>APPLICANTS</b> Kojiro Hamabe, Tokyo, JAPAN; <b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/JP99/06086 11/02/1999 <b>** FOREIGN APPLICATIONS *****</b> JAPAN 311833/1998 11/02/1998				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 98
<b>INDEPENDENT CLAIMS</b> 44				
<b>ADDRESS</b> Ostrolenk Faber Gerb & Soffen 1180 Avenue of the Americas New York, NY 10036-8403				
<b>TITLE</b> Transmission power control method and transmission power control apparatus in mobile communication system				
<b>FILING FEE RECEIVED</b> 5544	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	